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ADDRESS

TO THE

INHABITANTS OF ABERDEEN,

RESPECTING THE

Medical Attendance of the Poor,

AT

THEIR OWN HOUSES.

BY

WILLIAM HENDERSON, M.D.

ABERDEEN:

PRINTED BY D. CHALMERS AND CO.
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It may be proper to premise, that the views developed in this Address were made the subject of an Essay, read to the *Medical Society* some months ago, which seemed, generally speaking, to meet with the approbation of my professional brethren ; and that, since it has been put into its present form, it has been submitted to Drs. LIVINGSTON, MOIR, SKENE, and OGILVIE, who have permitted me to say, that they have a favourable opinion of the plan I have ventured to propose.

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# ADDRESS,

&c.

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IT may be asserted, without fear of contradiction, that few Charitable Institutions are of greater importance than those whose object it is to afford to the Sick Poor a gratuitous supply of medical aid; and the enquiry, in what mode such aid may be most effectually, as well as most economically afforded, becomes interesting in exact proportion to the importance of the object to be attained. This consideration must be my apology (if apology be necessary) for addressing the following remarks to my fellow citizens respecting this subject.

We possess, it is true, a greater number of Institutions for this purpose than, I believe, any other town, of the same size, in the British dominions; and hence it may, by some, be thought unnecessary to bring under the consideration of the inhabitants a point which apparently is already so well understood, and whose importance is so fully appreciated. Such as may feel disposed to view the subject in this way are entreated only to suspend their judgment, until they have given a candid perusal to these lines. And if there are any who might be inclined to ascribe unworthy motives for what I am now doing, to them I have only to answer, that if, after they have read with patience and candour what I here offer, they still see reason to suspect me of such, I have much mistaken my own principles of action, or do not possess the art of expressing



myself, so as to convey to others the ideas as they pass in my own mind.

It is proposed, in the following pages, to consider,

*First*, The description of persons who are properly the objects of this species of charity.

*Secondly*, The means at present adopted in this place for affording them the relief of which they stand in need.—And,

*Thirdly*, Whether, in certain particulars, some alterations might not be introduced, so as to render the charity more effectual and more permanent than it is on the present plan?

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THE Poor, who stand in need of medical assistance, may be considered as consisting of four classes.

1st. *Those who, having a small income to depend on for their maintenance, can out of it afford to pay for such medicines as they require during sickness, but are not able to recompense a Medical Practitioner for the trouble he is put to by an attendance on them, far less to reward him for the benefit they may have derived from his advice.*

Of this class there are many who have seen better days, and have been accustomed to many of the comforts of life, which, in their declining circumstances, they are unable to procure. Such individuals become in fact more necessitous claimants for gratuitous medical assistance, when sickness assails them, than the majority of those who have always been obliged to submit to privations, and who do not feel the want of many things which to these are, by long habit, become necessary. To refuse such assistance to persons in this situation (the greater number of whom are helpless females, or

persons far advanced in life,) merely because they have a certain income, and because, in the opinion of others, they might be able to spare some of the articles on which their comfort depends, but which may not be judged necessary to their existence, would be a refinement of cruelty; and I would willingly believe, that there are but few that would for a moment think of curtailing the very few enjoyments that are left to such an individual, by demanding that any part of his small income should be given to a medical man, as his fee.

2d. *Those who depend on their manual labour for their daily bread, and who therefore cannot spare any thing to pay for either attendance or medicines, when sickness puts a stop to their toil; but who have laid by a small pittance, or can depend on their friends for their maintenance while they labour under sickness.*

This class comprehends many of the most industrious members of society; and the claims of justice, as well as of humanity, require, that, when they are prevented by sickness from pursuing their useful labours, they be provided with that assistance which is necessary, by the community who have reaped the benefit of their industrious exertions when in a state of health.

3d. *Those who, from the extreme penury of their circumstances, cannot possibly procure the requisite sustenance and accommodations when they are laid on a sick bed.*

In this class will be found individuals, whose poverty arises from different causes. Some may have been, from their infancy, in a state of penury; others may have been reduced to want by the pressure of the times, by the charges of rearing a numerous family, or by accidental losses; and some may



have been the authors of their own misfortunes, by giving way to idle, improvident, or dissipated habits.

In those cases, where the object is merely to afford the means of support to such as cannot maintain themselves, it may be well to make a distinction among the claimants for charitable assistance, and to apportion the relief afforded, as much as is possible, to the moral character of the applicant ; but where the object in view is to repel the attacks of disease, it does not seem that any such distinction can be attended to. It must be recollected, that he who has brought a disease on himself, by his own misconduct, will not be less affected by the pain attending it, nor less likely to suffer from its consequences, than he who has virtuously struggled against the evils of poverty, and honestly attempted to maintain himself by his own industry. The facts, in so far as they regard the present object, are, in either case, exactly the same: disease is added to poverty, and humanity requires that means be adopted for its removal, without nicely enquiring into the worthiness or unworthiness of the sufferer.

A fourth class may be supposed, consisting of persons otherwise belonging to one or other of these three, *but who, from the nature or violence of their complaints, require to be more directly under the inspection of their Medical Attendants than they can be in their own habitations, or whom the safety of the community requires to be removed to a house appropriated for the reception of such patients, in consequence of the infectious nature of their disorders.*

It must be obvious, that this class contains the objects that are commonly considered proper for admission into an Hospital ; but I cannot help thinking, that the individuals belonging



to the third class, viz. those whose poverty disables them from supporting themselves when sick, are not less proper objects for such an Institution than those whose disorder is of such a nature as to require the constant vigilance of a Medical Practitioner, or to endanger the safety of the community. It is no doubt true, as a general principle, that Medical Hospitals being intended, not to afford maintenance to the Poor, but to give the means of curing or alleviating the diseases under which they may labour, no person ought to be admitted into them whose disease does not require such a measure; but it does not appear to me, either that the object of such an Institution is misunderstood, or that its funds are misapplied, when persons are received as patients, who, if they had the best medical advice under heaven, and the most liberal supply of the requisite medicines, could not avail themselves of either, from wanting the means of support while they continue to be visited by disease.

Owing, however, to the nature of such an establishment, the number of nurses and other attendants required in it, and the cost of maintaining the patients who are received into it, the number of those who participate in its benefits must always be, in some degree, limited; and many, whose diseases or whose circumstances render them highly proper objects for admission, must occasionally be excluded, because it is frequently impossible to admit all who present themselves at the same time with this view. It becomes therefore necessary to select the most urgent of the applicants, although perhaps some of those who are unavoidably refused at one time may more imperiously require the benefit of the Institution than others that are admitted when the wards are less crowded.

It requires also to be noticed here, that, according to the rules adopted in the Infirmary of this place, no patient is received who labours under a disease that is evidently too far advanced to admit a hope of cure, or of at least partial alleviation; and, when not carried to excess in practice, this rule appears to be a salutary one: for a patient admitted in these circumstances would cause an expenditure to the Hospital from which no adequate benefit would be derived, and he might, by lingering for a considerable period, prevent the admission of two or three, who might have been benefited by the use of medicines.

It would obviously be improper, because directly contrary to the dictates of humanity, that those applicants who are refused should be sent home, to pine under the diseases with which they are afflicted, without any medical advice being afforded them. For this reason, the Physician, whose province it is to select the cases which he judges most proper for admission into the Hospital, is also entrusted with the care of prescribing for those to whom he is obliged to refuse admission. It is of these, therefore, that the class of out-patients ought, in strict propriety, to be composed: but, in most places, a degree of latitude is allowed, in regard to this class of patients, which cannot be viewed but with feelings of the warmest approbation, inasmuch as it extends the benefit of the Institution to many objects which it could not otherwise embrace. I allude to the practice of allowing patients to receive advice and medicines from the Infirmary, who do not apply with any wish of being received into the wards. Thus the description of patients known under the name of out-patients consists of all who have unsuccessfully applied for admission



into the Hospital, and of others who apply to the admitting Physician of the Infirmary for advice, and who receive the medicines which he may order, gratuitously, from the Infirmary Shop, but who reside at home while using these medicines.

But as the physician, whose province it is to prescribe for the out-patients, is not required to visit those who apply to him at their own houses, no one can be included in this description of patients who is not able to attend at the Infirmary at the prescribed hour. There must, however, be many of the applicants for admission, who, if refused, would be unable to give this attendance, and those too the very patients who are unquestionably most in want of medical aid. Such must not be left to linger, until death put an end to their sufferings, or until they are so far recovered as to be able to attend the Physician, at the Infirmary. Without doubt, every medical man would consider a portion of his time devoted to gratuitous attendance upon persons thus situated, as a debt due to the community, which the feelings of his own heart would urge him to discharge. But the assistance which the poor could obtain in this way must always be limited and imperfect; for while they have it entirely in their own power to choose to whom they will apply, the most frequent applications will always be made to those whose reputation is the greatest, and they cannot be expected to take so great a portion of time from their lucrative practice as would be necessary in order to answer all the demands made on them. Thus there remains a necessity for some provision, more certain, and better proportioned to the extent of the wants which it is intended to relieve. This is the object proposed to be attained by the establishment of Dispensaries; institutions where the sick poor may have the benefit of medical advice, and attendance at their

own houses, when necessary, along with a supply of the medicines required for the alleviation or cure of their disorders.

Such Institutions seem calculated to embrace the whole of the four classes into which I have divided the sick poor, except those that are admitted into the Infirmary, or attend there as out-patients. It may even be in some degree a matter of doubt whether they ought not to include among their objects all who are disappointed in their applications for admission into the Infirmary; and, at any rate, it seems, that, in speculative propriety, they ought to embrace all such as now apply to the Infirmary, professedly with the view of becoming out-patients; unless when the patients thus disappointed, or applying to be received as out-patients, reside in the country. But, in many cases, the disadvantages which follow from stretching speculative principles to their full extent greatly overbalance any good effects that may be held to result from a strict adherence to unity of design, in practice; and this, I believe, to be one of those cases.

In a town then, furnished, as this one is, with an Hospital which is generally sufficient to accommodate all the applicants for admission who can be received consistently with its rules, and whose funds can, without injury, admit of the small additional charge that attends the dispensing of medicines to those who apply as out-patients, the object of a Dispensary should be to supply with advice, attendance, and medicines, all the remaining part of the four classes already enumerated. It may be doubted, whether those comprehended in the first class ought to be supplied gratuitously; and, in some instances, it may be more agreeable to their feelings to be allowed to purchase the medicines ordered, as it would tend, in some degree, to do away the idea, so irksome to delicate minds, of



receiving charity ; but there surely can be no question, that the advice and attendance given by the Medical Practitioner attached to a Dispensary ought, in no case, to be considered as requiring any remuneration from the patient.

In entering upon the consideration of the second division of the subject, it is not my intention to advert, at any length, to the constitution or management of the Infirmary. The justest eulogium which I can pass upon that excellent Institution is also the shortest: it fulfils its objects, and in a less expensive manner than most similar Institutions, yet so as not to deprive the patients of the comforts which they have been accustomed to, in so far as they can be obtained in such an establishment.

My principal scope is, to give a succinct account of the Dispensaries at present existing in this place, with such particulars regarding them as appear to me to be of importance, in relation to the object proposed to be attained by such Institutions, and the mode to be adopted in order to the attainment of that object.

The first Dispensary established in Aberdeen was opened by the Managers of the Infirmary, in 1781, and the view which they at that time took of the nature and importance of the Institution will be seen from the annexed papers.\* They considered it, however, merely as an experiment, which they would not pledge themselves to continue beyond a year. Dr. WILLIAM LIVINGSTON was appointed by them to officiate as Physician to this new Institution ; and beneficial effects having been found to arise from it, it was continued, by an annual vote of the Managers ; and, on Dr. LIVINGSTON's election as one of the Physicians to the Infirmary, Dr. FRENCH was ap-

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\* See Appendix, No. I.

pointed to attend it. On Dr. FRENCH's resignation, in 1785, a memorial was presented to the Managers, by the medical men at that time in the management, the consequence of which was a resolution, that "the Dispensary shall be continued, but "the funds of the Infirmary shall not be burdened by this Institution, but it shall be entirely distinct from it;" and a Committee was appointed to draw up regulations for the Dispensary, the substance of whose Report is given in the Appendix.\* Dr. GORDON was soon after appointed to attend the Dispensary patients, and the Institution continued on this footing, still viewed as a branch of the Infirmary, but receiving no assistance from its funds, until 1788, when Dr. GORDON gave in to the Managers the representation which will be found in the Appendix.† The result of this remonstrance was, the appointment of a Committee to digest a scheme for the proper support of the Dispensary; and this Committee, in their Report, recommended that the applications formerly made to the congregations, public bodies, societies, and manufacturers in town, for subscriptions, should be renewed, in order to provide funds sufficient to defray the Physician's salary, and that the Infirmary should pay for the medicines used; adding, "if the subscriptions exceed £42, the balance to be "paid to the Infirmary." On this footing the Dispensary continued till 1790, when, as will be seen by the minute quoted in the Appendix,‡ it was completely and finally separated from the Infirmary. On Dr. GORDON's resignation, Dr. DYCE was appointed by the subscribers to attend the Institution, and he now holds the office.

Some years after, another Dispensary was opened by Dr. P. GRANT, after whom the late Dr. SELBY officiated, until his

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\* No. II.

† No. III.

‡ No. IV.



appointment as one of the Physicians to the Infirmary ; at which period he was succeeded by Mr. FRASER, who now holds the appointment.

Some time subsequent to this, a third Dispensary was opened by Mr. WILLIAMSON, and he, on being elected to attend the Infirmary, was succeeded by the late Mr. JAMES ALLAN and myself. On my appointment to the Infirmary, it fell altogether into Mr. ALLAN's hands, and he dying soon after, was succeeded by Mr. CAMPBELL, who now officiates.

A few years ago, a Dispensary was opened by Mr. LESLIE, intended to supply the sick poor of Footdee, and the parts of the town adjacent to the harbour ; and, more lately, another has been set on foot by Mr. CADENHEAD, for the benefit of the inhabitants of Gilcomston, and the south district of the parish of Old Machar.

Thus there are no fewer than five Institutions in Aberdeen, for the purpose of supplying the sick poor, gratuitously, with medical aid ; and if it be considered that there was but one establishment of this sort in Edinburgh, until about four years ago, when a second was opened, and that there are scarcely more in London than in this place, it appears difficult to avoid the conclusion, that either these places are lamentably deficient in this most useful species of charity, or this town is furnished with Institutions of this sort in greater number than its wants require.

It surely will not be necessary to disprove the former part of this conclusion. The inhabitants of both London and Edinburgh have uniformly shewn themselves ready to obey the calls of humanity, and there can be no reason to doubt that the number of Dispensaries in these cities would be speedily increased, were it not found that those already in operation are

sufficient for the wants of the community. The reasons why so small a number of such Institutions are able to afford assistance to the sick poor of so large and populous cities, seem to be, 1st. That each Dispensary has several medical men attached to it; and, 2d. That each embraces only a certain district of the town: by both of which means the labour devolving on each practitioner is very much diminished.

Must we then admit the latter part of the conclusion? I confess, that I do not see how we can avoid it; and I am disposed to think, that the only circumstance which has prevented it from being seen in all its force, long ere now, is, that the Practitioner of each of the Dispensaries is liable to be called on to visit patients residing at such distances from each other, that a very few visits are sufficient to occupy a whole day, and he is thus fully and laboriously occupied; while, perhaps, those patients who cost him the greatest labour, and take up most of his time, reside within a very short distance of some of the other Dispensaries.

This conclusion is not merely speculative, and unproductive of practical effects; on the contrary, it is pregnant with consequences, injurious, in no small degree, to the cause of charity, and to the interests of those who are the objects of such Institutions. I shall state a few of these consequences. In the first place, when donations are given with a view to the benefit of the poor, it is in most instances necessary, in order to give full effect to the intentions of the donors, to set apart a portion of the gifts, to defray the expense of an establishment where the business of the charity may be transacted; and it is obvious, that if five separate establishments are to be provided and kept up, the sum annually subtracted from the whole amount of donations received, must be much greater than would otherwise be necessary.



Another consequence arising from this cause, which those who have had experience of such Institutions well know to be of no slight magnitude, is, that it affords the sick poor an opportunity of gratifying the love of change, so natural to the mind of man ; and they are often led, by whim, or other inducements, to shift about from one Practitioner to another, thus depriving both of the means of fully understanding the case they are called on to treat. Besides, it must frequently happen, that, when one Practitioner is thus called on to finish the work begun by another, he will not adopt precisely the same views of the modes to be employed in the cure ; or, at any rate, it is extremely improbable, that, in any case, the medicines ordered by both will be prescribed in exactly the same form ; and thus the ignorant and probably prejudiced patient will be led to form conclusions to the disadvantage of one or the other of his medical attendants. Moreover, the sick poor are frequently tempted to apply to several medical men, at the same time, (and always without apprising each of the attendance of the others,) who will thus, by differences in the nature, the form, or the manner of using the medicines they may think necessary, weaken the patient's confidence in the skill of them all, and lead him not to pay implicit obedience to the orders of any of them ; or, perhaps, to follow his own advice, or that of some ignorant empiric, to the entire neglect of all their prescriptions.

This is not an imaginary case. I have known instances where not fewer than three medical men were called in thus, to sit in judgment on each other's practice, and where of course they unconsciously thwarted each other's good intentions, and retarded the cure of the patient, by unknowingly preventing each other's prescriptions from being attended to.

A third bad consequence sometimes follows, from the too lavish supply of medicines gratuitously to the sick poor. It is not probably of frequent occurrence: indeed I should not have thought, had I not had proofs of several instances of it having occurred, that it could ever happen. I mean, that patients having applied to several Dispensaries, and having received from one of them as many medicines as they can persuade themselves to swallow, dispose of the rest to pettifogging retailers.

The sources and application of the funds by which these Institutions are supported, seem to require particular consideration.— These funds are derived exclusively from donations and annual subscriptions, with the exception of a bequest by the late Mr. JOHN CUSHNIE, amounting to £400, \* which was left by will, dated March 31st, 1800, “ To the President and Managers of the Infirmary, in trust for the two “ Dispensaries ;” † and the annual interest arising from this has been equally divided between the one now attended by Dr. DYCE, and that at which Mr. FRASER officiates. The other Dispensaries have, from their commencement, had no other source of income but the charitable donations and annual subscriptions of individuals: and such are also the chief support of these two.

This, perhaps, is the best footing, speculatively speaking, on which a public charity of this sort can be placed ; because it puts it completely in the power of the Subscribers by whom it is supported, to check any misconduct on the part of the

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\* I am informed by the Clerk of the Infirmary, that the amount actually paid to the Managers, in terms of this bequest, was but £384.

† See Infirmary Minutes, December 21st, 1801.



persons employed, and to withdraw their support altogether if they do not reform what has been found amiss. But, in practice, I believe that it brings with it effects which the wellwishers of the charity must regret. It will not be questioned, that it is extremely disagreeable for a man of independent mind to be placed in a situation where he must not only do his duty zealously, but is liable to have his best exertions undervalued, and his most anxious efforts for the welfare of those entrusted to his care misrepresented. Now, the relatives of a patient naturally feel a strong anxiety respecting him ; and in such circumstances, any thing that wears the most distant appearance of neglect, or any thing which their excited feelings can construe into such, on the part of the Practitioner, is apt to be deeply felt and long remembered ; and the persons by whose subscriptions the Institution is supported, may be liable to be swayed by exaggerated statements made by those whom they had recommended to his care, and may thus be led to imbibe prejudices against him, which his consciousness that without their aid the Charity cannot go on, may prevent him from repelling with that freedom which he would use, if he knew that its permanence depended only on the conscientious efforts of those connected with it.

Every one who has had any experience of Dispensary practice in Aberdeen, must know that it is a most laborious duty, if properly attended to ; and that it is frequently impossible to give to each individual case all the attention which the anxious relatives of the patient might think necessary : though I may venture to assert, that hardly any case will *really require* more care than it is in the power of the Medical Attendant to bestow. But as the relatives naturally measure the interest and importance of the case by their own anxiety, many instances will oc-

cur in which they will feel dissatisfied ; and if they succeed in interesting a Subscriber to the Charity by their causeless complaints, the Medical Practitioner must either submit to apologise and promise amendment, though unconscious of any fault, or else see a part of the funds which were entrusted to him for behoof of the sick poor, withdrawn. I do not say that such instances occur often ; but it appears to me, that the possibility of such a thing must act as an oppressive burden on the mind of the Practitioner.

With regard to the application of the funds collected for the support of these Charities, I cannot help thinking, that the mode which is adopted at present has a direct tendency to prevent the Institutions from becoming either permanent or respectable. Not only do they depend for their support on annual voluntary subscriptions, but at the end of each year the Establishment may be said to be put an end to : for, after the expences incurred during the year are paid out of the money collected, the remainder, great or small as it may happen, is commonly paid over to the Medical Attendant, as his salary. I am far from saying, that any instance has occurred of any of the gentlemen connected with these Institutions being overpaid, in consequence of this mode of proceeding—I believe the contrary has always been the case ; but the plan appears to be radically bad ; and, in the hands of a man whose probity might give way to temptation, it might lead to consequences subversive of the whole intention of the Institution. And besides, should the Subscribers choose to withdraw at the end of the year, the Charity must cease, as it does not possess one farthing of capital.

In many Establishments for the relief of the sick poor, both Hospitals and Dispensaries, the Medical Attendants officiate



without salary. Probably it may have been considered, that the opportunities for acquiring experience, as well as the facilities for introduction into lucrative practice, which their connection with extensively useful Charities must give them, are in themselves sufficient remuneration. This, however, must be noted, that they are not altogether without emolument from the Charitable Institutions where they are employed: for, in most, or in all instances of this sort, they are permitted to reserve to themselves the fees given by students, for leave to witness the practice of the Institution. But, as extensive acquaintance, suavity of manners, and other causes, may sometimes have as much influence in attracting students as eminent abilities or assiduous attention to the patients, the remuneration derived from this source will not always be necessarily in strict proportion to the merits of the Practitioner.

It appears to me, that the whole principle on which this arrangement is founded is objectionable. *The labourer is worthy of his hire*; and the man who fills a situation so eminently useful as the one under consideration, ought not to be left to depend on the casual and uncertain income arising from students. Neither, indeed, is it just to the Charity, that the sums arising from this source should be disposed of in this way: for, as the students attend the Institution with the view of deriving benefit from witnessing the treatment of the patients that resort to it, it would be but fair, that, at any rate, a part of what they are required to pay for leave to do so, should be given to the funds which afford the means of administering relief to the patients.

I believe that in this place no income is derived from this source by any of the Practitioners connected with the Dispensaries. In fact, it does not seem to have been ever imagined,

that students would think it worth their while to become Dispensary pupils ; and the only assistance which the Practitioners receive in visiting home patients, and in compounding the medicines, is from their own pupils or apprentices.

Another practice, I have been informed, prevails in the Dispensaries and Hospitals of some places, the intention of which is to lighten the expences of the Institution, or in some degree to make up the deficiency of salary to the Medical Attendants ; viz. that although the patients are acknowledged to belong to the poorer classes of the community, and to be unable to bear the charges which may be incurred in consequence of their sickness, they are yet required to pay a part of those expences : In Hospitals, to advance a certain sum, per diem, while they remain in the house ; and in Dispensaries, to pay either the whole or a part of the price of the medicines ordered for them ; or to give a certain small sum, as a fee to the Medical Attendant, at each visit. Such practices, I conceive, cannot be too strongly reprobated. They tend to sink the patient still deeper into poverty, and to diminish any little saving which he might have laid up, and which might have been sufficient to support him until the complete restoration of his strength should enable him to resume his labour. And they might induce an interested Practitioner to order expensive medicines unnecessarily, for the sake of the Charity, or to repeat his visits oftener than was required, for his own sake.

Should it be alledged, that if a small portion only of the price of the medicines ordered were paid by the patient, there would be no temptation to order expensive medicines, the greater part of the cost of which must be taken from the funds of the Charity, unless when an absolute necessity for their employment existed :—still there is another objection against this practice,



which appears to me a sufficient ground for rejecting it altogether ; viz. that it is impossible exactly to apportion the share to be paid by the patient to the circumstances of each individual, and that the sum which one might be able to afford without much inconvenience, would be altogether beyond the reach of another. Besides, in order to make this practice bear equally on all the patients, the share of the cost of medicines to be paid by them ought to be proportioned not only to the circumstances of the individual, but also to the duration of his disease ; since a person might be able to pay half the price of the medicines which he might require in an illness of a few days, who could not afford a tenth part of the cost of those requisite during a disease of several months continuance.

I have in the foregoing pages attempted to shew, that on the plan according to which the Dispensaries are conducted in this place, not only the remuneration of the Practitioner, but even the very existence of the Charity, is made to depend on the will of the Subscribers. I am far from thinking, that those who support the Institution ought not to possess a salutary controul over those whom they employ ; but it does not appear to me, that a controul can be looked on as salutary, which extends not only to checking any misconduct on their part, but also to the total annihilation of the Charity.

This consideration leads me to the question, Whether it be justifiable in the Managers of Charitable Institutions to amass capital, or whether they ought not, as stewards for behoof of the poor, to give them the full benefit of all that is contributed on their account ? In a merely speculative view of the subject, the latter may seem to be the plan which ought to be adopted, particularly with regard to those sums which are received as

annual subscriptions, and which, it may be said, ought to be expended within the year, if the extent of the Charity be such as in any way to require it. But if we view the measure with reference to its practical consequences, we shall, I believe, find it difficult to avoid the conclusion, that, provided the Charity be not stinted by an undue economy, it is more eligible to attempt the establishment of a small capital; not such as to enrich the Institution and render it altogether independent of voluntary contributions, but sufficient to meet any contingent increase of expenditure which an unforeseen season of sickness may occasion.

It has been already noticed, that if the whole money collected at the beginning of a year be laid out at the end of it, the existence of the Charity ceases, in fact, at the expiration of each year, and is annually renewed. In these circumstances, a diminution of interest in the object to be attained, or the interference of any other Charity which they might wish to support, or any dissatisfaction with the Practitioner employed, (however unfounded) may prevent the Subscribers from coming forward to renew their contributions, and thus cause the Charity to be discontinued altogether. Whereas, were there some small fund laid aside from the subscriptions of former years, a diminution of income from these or similar causes would be less sensibly felt, and the Charity might be able to support itself for a time, until the influence that had operated against it should cease. And it is certain, that however much the Subscribers might occasionally be influenced by their desire to befriend other Charities, or whatever objection they might feel in particular cases against the mode in which the relief required by the sick poor might be afforded by an Institution of this kind, there could be but one opinion respecting the



usefulness of this species of Charity. And where this is the case, it does not appear to me that there would be much reason to apprehend any permanent deficiency of income from any of these causes, provided only that the Institution possessed sufficient funds to carry it on for a time, when any such temporary cause might operate against it.

It is true, that as these Institutions are managed in this place, this object could not be attained without either for a time diminishing the extent of the Charity, or still further reducing the surplus given to the Medical Attendant; and I should be sorry to have it thought that I could advocate either of these measures. The objects of this sort of charity are the poor in their most calamitous circumstances, and it would be highly wrong to stint them of the relief which they require. On the other hand, the labour of attending a Dispensary is of no ordinary magnitude; and it does not seem, that the man who fills so laborious and so useful a station, can in justice be deprived of any part of his reward.—There seems to be but one other way in which the object alluded to could be obtained. The inhabitants of Aberdeen have always shewn themselves ready to come forward in behalf of any useful and praiseworthy object; and I would fain hope, that, on a point of so great importance as the one under consideration, an appeal would not be made to them in vain.

It has been already noticed, that incurable patients are not received into the Infirmary, and if they be unable to attend there as out-patients, they must, of course, resort to the Dispensaries. But the Medical Attendants of Institutions which depend entirely for their existence on voluntary subscriptions, require obviously to be much more cautious not to admit any charge which does not bring with it a reasonable hope of at-

taining the object for which it has been incurred, than a charity such as the Infirmary, which derives a good part of its income from other and more certain sources. Besides, if the Medical Attendant wishes, as he naturally must do, to preserve the confidence of the Subscribers, he must feel disposed not to admit upon his list patients whom he sees no prospect of curing, as the number of deaths in the course of the year would be considerably increased were he to do so, and some of the Subscribers might be inclined, from a hasty view of the matter, to attribute this to his want of skill, and not to its true cause, his humanity.

I have hitherto avoided saying any thing of abuses existing in the practice of these Institutions; and I would willingly persuade myself, that the character of the Practitioners employed to attend them is such, as to afford a sufficient guarantee that no such will ever have place. But I cannot avoid perceiving, that the plan on which they are conducted in this place may leave room for many flagrant abuses; and, were the Practitioners disposed to take advantage of the opportunities thus afforded, they might be able to convert one of the most laborious situations in which a medical man can be placed, almost into a sinecure:—As, for example, by entrusting the principal care of the home-patients to their pupils; or by resolving, that after a certain hour in the evening they would not obey any call, however urgent, which they might receive on the part of a Dispensary patient; or they might, by using few medicines, and those the cheapest that could be got, without regard to their quality, considerably increase the amount of their own annual salary. On this point I forbear to insist farther, because it appears so obvious as not to require it, and because it is my principal study to put nothing down here that might, by



possibility, be supposed to proceed from any motive more questionable than the desire of seeing a valuable and useful species of Charity established on a permanent and respectable footing.

I proceed, therefore, to the third division which I proposed to myself at the outset ; viz. To suggest some alterations in the mode of conducting these Institutions, which appear to me likely to lead to good effects, if adopted.

It will not be denied, that, by diminishing the number of separate establishments, the proportion of the aggregate funds required for rent, furniture, &c. might be considerably reduced. Neither, I think, will it be questioned, that as a certain degree of loss on the medicines, from deterioration by keeping, as well as from waste in compounding, is unavoidable, these causes of increased expence must be in direct proportion to the number of separate stocks that are kept. If, therefore, by a judicious union of the Institutions of this kind at present existing in this town, a part of these expences might be saved, there is at once a way opened by which, without in the least affecting the income derived by the Medical Practitioners from their attendance on the Charity, a small surplus might be annually reserved, in order to the establishment of a fund to provide for contingencies, and secure the permanence of the Charity. And this measure, I am disposed to think, would be likely to produce a source of income which at present these Institutions do not possess ; viz. that students might be induced to pay a small fee for leave to witness the practice of the medical men attached to such an Establishment. Should this consequence follow the adoption of the proposed measure, it appears to me that the fees thus paid ought to be applied to the funds of the Institution, in the same manner as is done in the Infirmary.

It must, however, require a considerable time before the saving from the proposed measure, and the income arising from the attendance of students, could form a fund of sufficient magnitude to give permanence and respectability to the Institution. And when I consider the great utility of the object in view, I flatter myself that I do not overrate the benevolent disposition of my fellow-townsmen, in hoping that they will see the propriety of instituting a fund for the purpose of giving effect to the measure, and enabling the Institution, by the help of its small annual savings, speedily to acquire the little capital that is required.

To go into all the details of the constitution and management of an Institution such as appears suited to the wants of the sick poor of this place, would be at present premature. A few hints; however, may be allowed here, which may embrace some of the principal points.

1st. Would not the relief of the sick poor be more effectually provided for, by the establishment of a single Institution, attended by several medical men, than it can be by a number of Institutions of the same kind, operating independently of each other, and in many cases liable unconsciously to thwart each other's operations?

Were this measure carried into effect, it would at once be put completely out of the power of the applicants to resort, as they at present do, to more than one Charity at the same time; especially as it would be easy to check this practice effectually, by a weekly comparison of the books of the Institution with the outpatient list of the Infirmary. It might, in this case, even become a question worthy of consideration, whether those patients who reside in the town and its suburbs, and whose cases do



not require their admission into the Infirmary, ought to be received there as out-patients. \*

2d. Would it not be necessary, in the event of such an Institution as is here recommended being established, to divide the town into several districts, allotting one to each of the Medical Attendants, so that it should not be considered a part of their duty to visit home-patients out of their own districts, unless in the way of consultation with any of the other attending Practitioners?

If, for example, the districts allotted to the Gilcomston and Marine Dispensaries remain as at present marked out, and the rest of the town were divided into three other districts, the labour of Dispensary practice would be very greatly diminished; and this is an object of no small importance.

3d. If such an establishment should be set on foot, would it not become necessary to employ a regularly bred Apothecary, who should be always at hand to compound the medicines ordered by the medical men in attendance?

4th. Ought not the salaries of the Medical Attendants connected with such an Institution to be fixed, at such a sum as can be afforded without exhausting the funds, instead of being left to rise according to the alacrity of the Subscribers, and to fall as the number of patients increases?

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\* The measure of excluding such persons from the class of out-patients, was recommended to the Managers of the Infirmary, in the year 1813, and several steps were then taken towards its adoption; but it never was carried into execution.

5th. Would not the funds at present applied to this species of charity be sufficient to defray the expences of such an Establishment, and to allow the Medical Men employed nearly, if not fully, as much yearly salary as they at present derive from the separate Institutions?

It appears to me, that when we take into account the saving of rent, and shop furniture, and the diminution of the aggregate stock of medicines, as well as of the loss in keeping and compounding them, there can be little doubt that this would be the case; and perhaps it might even be done without entirely exhausting the funds of the Institution. But,

6th. Should the funds not be sufficient at first, would not the immense saving of time and labour accruing from the division of the town into districts, more than compensate for a slight temporary loss of this kind, by allowing the Practitioners more leisure for lucrative practice?

It does not seem to me that there can be much difference of opinion as to the propriety of having the salaries given to the Medical Attendants of every establishment fixed. And if to the above consideration we add the certainty of its continuance, and the great probability of its being increased, as the public become more sensible of the advantages of the Institution, I would indulge a hope, that no one would suffer the slight diminution of income which would probably for a time take place, to weigh with him as an objection against the measure.

7th. Might not an Institution on this plan, if once begun, be rendered permanent, by setting aside a small sum annually out of the saving accruing from the junction of the Establish-



ments already existing, and by adding this saving to a fund provided by the voluntary subscriptions and donations of such as might think well of the plan ; thus giving rise to a small capital, which might be managed and applied to its objects in a way nearly similar to that in which the funds of the Infirmary are now managed ?

I am not ignorant, that at present each Dispensary has its Managers ; but they have no permanent funds at their disposal. They are merely elected, at the commencement of a year, to superintend a fund which is formed at the same time, and which is exhausted before they go out of office, at the end of twelve months.

8th. Would it not be more consistent with the spirit of such a Charity, if, even although some of the patients might be thought able to pay for their medicines, no money should be taken from any ?

I am aware of the difficulty attending this part of the arrangement. But the abuses which might creep in, were any of the patients required to pay, seem to me a much greater evil than any slight loss which the Charity might sustain, by giving medicines gratis to a few individuals who could afford to pay for them : and even this might be avoided, by allowing such to purchase them from the Apothecaries in town.

9th. Were an Institution established embracing the whole of the patients at present resorting to the several Dispensaries, would it not be an object worth the attention of students, and might it not derive a certain addition to its income from this source ?

I see no cause for hesitating to say, that I conceive such an Institution might, in time, become a most valuable acquisition to the Medical School of this place; and I am strongly disposed to think, that were it once established on an extensive, permanent, and respectable footing, the medical students would not long remain indifferent to the advantages which they might reap from an attendance on its practice.

WM. HENDERSON.

*ABERDEEN, March 26, 1822.*



## APPENDIX.

N<sup>o</sup> I.

*Memorial presented to the Managers of the Infirmary,  
March 19th, 1781.*

“ THE Infirmary of Aberdeen has been a happy means of relief to many in distress ; and the good effects of it are so well known in this country, that no explanation could set them in a clearer light. The original Institution, as well as the spirit with which it has hitherto been supported, does great honour to the town of Aberdeen. And as it is well known that the inhabitants contribute liberally to the annual expence, it seems reasonable that the influence of this Charity should, if possible, be extended to every poor family or individual in the town who may stand in need of it.

“ In the management of so benevolent an Institution, no person can be offended at an inquiry, whether it may not be rendered still more useful ; and if this be practicable, every good man will wish the experiment were made.

“ It has been observed, with regret, by some of the Managers, and it appears from daily experience, that there are in town many persons who cannot derive benefit from the Infirmary on the present footing. Those under incurable or lingering diseases are improper for an Hospital, though they receive partial relief, and their distress be at least alleviated by proper medi-

cines and attendance. There are many poor people subject to complaints in which confinement would be hurtful. Many are so suddenly seized with disorders, that they cannot be moved but with the most imminent danger. The connections of others render their presence necessary in their families ; and to that duty they are often obliged to sacrifice the means of recovery till too late :—women who have children, or who are nursing when they fall sick, need only be mentioned, as in this situation. In every view, the case of infant children is an object of the utmost importance : they cannot be properly cared for in an Infirmary, and they require the tenderest care and attention of a mother. In infectious diseases, as the small-pox, even those who are further advanced in life should not be admitted as patients ; and it is well known how many lives are lost in this disease by injudicious management, or the want of proper assistance. Many other cases might be suggested, of sick and diseased persons who cannot enjoy the benefit of this Charity, and yet are utterly incapable to pay a Physician, or even to purchase the necessary medicines.

“ These considerations seem to furnish strong motives for extending the benefit of medicines and assistance to all those indigent persons who either have it not in their power to go, or who cannot be received, into the Infirmary.

“ It would not be impossible to draw a proper line of distinction betwixt them and the Infirmary patients. And as medicines are at present given to all who apply, the only additional expence would be for the attendance of a Physician, who, as a part of his duty, might inoculate the children of such poor as would agree to it.

“ Upon the whole, it is submitted to the consideration of the Managers, whether the attendance of a Physician upon the poor



of certain descriptions at their own houses, does not appear to be highly necessary, and by what means such a scheme can be best accomplished. The only additional expence, as already observed, which this would occasion, is for the attendance of a Physician; and that expence, provided it could be afforded, should not be withheld, if by means of it useful lives might be saved, or the sufferings of the poor alleviated."

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*Opinion, on the above Proposal, presented by desire of the Managers, at a Meeting held April 17th, 1781.*

"THE proposals which were presented and read to the Managers at the last general meeting, relative to a further extension of charitable attendance on the sick and distressed poor of this place, must meet with the approbation of every humane and benevolent heart.

"There may be difficulties in accomplishing the most useful Institutions; but the intended plan appears to me, and I hope will appear to the public, in so favourable a light, that I am hopeful it may be put in execution at such a small expence as would not be thought a matter of great consideration in communities of much less consequence than the city of Aberdeen.

"It is foreign to my department to propose or to devise any particular mode for defraying the expence of this Charity; but from what I know of the inclinations and dispositions of the most respectable part of the inhabitants of the town, I have great reason to believe that it will meet with proper encouragement and support.

"It is already explained in a very distinct manner, in the proposals now printed, what are the advantages which the

poorest and lowest class of people may reap from the proposed Charity. But there is a different class of people who might likewise be particularly benefited by this Institution, and who, I think, are highly deserving of aid and attention: I mean, some poor but otherwise respectable persons, who, from a state of independence, have been reduced by misfortunes to indigence and sickness. Such people who, (from a spirit above their situation,) would not wish to apply for assistance to a public Hospital, might be induced to ask for proper advice and attendance, where they might receive benefit and relief without the additional mortifying circumstance of having their wants exposed to public notice.

“ The happy effects of an Infirmary in this place have been generally acknowledged for many years ; but a variety of cases daily occur, in which the admission of them into an Hospital would be improper for the patients, and contrary to the intentions of such an Institution.

“ The two periods of human life which stand most in need of assistance are infancy and old age in distress ; and the diseases and calamities incident to these periods are, in general, very improper for being admitted into an Infirmary. It is unnecessary for me at present to discriminate the diseases to which children and old people are chiefly subjected. The former require all the care and tenderness of parents ; and the latter are too frequently brought to an Hospital when their diseases are evidently incurable by any human act. In support of this last assertion, I shall make it evident from the Infirmary books, that more than one-third of the number of those who die in the Hospital are poor old weakly people, who have been lingering under all the different diseases to which an advanced period of life is necessarily subjected.



“ Such objects are no doubt highly deserving of aid and compassion ; and though their diseases cannot be cured, much may be done to alleviate their pain, and to render their lives more easy and comfortable.

“ The middle period of life is likewise afflicted with many disorders which are improper for being received into an Hospital:—such as, consumption in all its stages—the scrophula, or king’s evil—stomach complaints—people with weak and delicate nerves—many of the diseases to which the female sex are liable—and, in short, most of those disorders which require free air and exercise to complete a cure.

“ There are no doubt many exceptions to these general rules, which can only be regulated by the judgment of those who are entitled to determine upon matters with which health is connected.

“ If the intended plan shall be put in execution, it will be proper to think of such rules and regulations as may prevent mistakes and confusion in conducting the practice.

“ In the first place, it is necessary to ascertain how far this Charity is to be extended : and I am humbly of opinion, that it must be confined to the poor within the town, and to its most contiguous precincts, as it would be impracticable for any one person to attend them at any great distance, though, upon very pressing emergencies, a man of humanity and feeling would not restrict his attendance to any limited boundary.

“ It will likewise be necessary, that such poor people as ought to be attended at their own houses, should be recommended by the Minister of the quarter where they reside, or by some respectable inhabitant of the town. Many of them, likewise, may desire to be attended at home when their cases require the benefit of the Infirmary ; and when instances of

this kind occur, the point should be determined by the judgment and opinion of the Physician.

“ When patients make application at the Infirmary either for admission or advice, the Physicians in ordinary should determine if their cases could be more properly treated at their own houses ; and in that event they should be recommended to the visiting Physician.

“ The recipes for such patients as are attended at home should be sent to the Infirmary shop at the usual hours of attendance, and the prescription, with the patient's name and place of abode, should be entered into the book kept for the out-patients. But if the gentlemen who presently have the direction of the Apothecary business of the Infirmary should not incline to superintend the apprentices in making up the prescriptions of the visiting Physician, in that event it will be necessary for him to attend at the Infirmary shop, in order to see his own prescriptions properly prepared and executed.

“ The visiting Physician should likewise have a book, in which the names of the patients he visits, and the particular places of their residence, should be carefully and distinctly entered.

“ Though the expence for wine to the Infirmary has of late years been considerably increased, owing to the great number of patients under low nervous fevers, it would be very proper to grant an allowance of wine to poor weakly people in their own houses, when the Physician thinks it absolutely necessary. For this purpose, he should send an order in writing to the housekeeper for the quantity of wine wanted to the patient, with the person's name and place of residence, which should be entered in a book to be kept by the housekeeper for that particular purpose.—When it is considered, that many of these



poor people, if they were not attended at home, must have been received into the Infirmary, the additional expence for wine, as well as for medicines, will probably be very trifling, and (it) will not be ordered but in cases of pressing necessity.

“ These are the most essential regulations which have occurred to me in (considering) the proposed plan, and I shall be happy if they meet with the approbation of the Managers and of the public, and I will most readily give all the advice and assistance in my power to render it of general utility, not doubting that a proper person will be appointed to act as Physician for that department, in whose attention and assiduity I can confide, and with whom I may co-operate, with the hope of doing some service to the public, and with satisfaction to myself.

(Signed) “ THOS. LIVINGSTON.”

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## Nº II.

*Substance of a Report made, February 9th, 1786, by a Committee appointed to draw up Rules for the Dispensary.*

THEY recommend application to the Kirk-Session, St. Paul's Chapel, and the other congregations in town, for an annual collection ; and a similar application for annual contributions, to the Incorporated Trades, the Shipmaster's and other Societies, and to the Manufacturers in town. And they advise the adoption of the following rules :

1st. The objects of this charity to be limited to “ Persons who cannot be admitted into the Infirmary, or attend there as

out-patients—children who require the constant care of a mother or keeper—mothers whose residence at home cannot be dispensed with—all such as the very dangerous nature of their disorder renders incapable of being removed to an Hospital—such, as the nature of their distemper is improper for the confinement of an Hospital—and such as, from the regulations of the Infirmary, are inadmissible.”

2d. Printed forms of recommendation, with blanks for the name, designation, and residence of the patient, to be provided.

3d. The Convener and Deacons of the Trades, the Boxmasters or Presidents of Societies, and Manufacturers, to recommend each their own members or servants. The Magistrates and Clergymen of all denominations to recommend those not included in any of these. Each Society or Manufacturer to be entitled to send one patient for every 1s. 6d. subscribed. Private individuals to send a patient for every 2s. 6d.

4th. The Physician to have a discretionary power of rejecting those recommended to him, if improper; provided, that before doing so he visits them at least once, and states the cause of their rejection to the persons by whom they were recommended.

5th. Persons residing within the parish of St. Nicholas and Footdee only to be received.

6th. Exact lists of the patients to be kept, and compared once a-fortnight with the books of the Infirmary.

7th. The Physician to commission the medicines from the best places, and to attend to their preparation.

8th. In all ordinary cases, recommendations to be sent to his house by 10 A. M.



N<sup>o</sup> III.

*Representation addressed by Dr. GORDON to the Managers of the  
Infirmary, March 17th, 1788.*

“ GENTLEMEN,

“ It appears from the return of patients and account of expences belonging to the Dispensary, that both have increased in the course of last year, while at the same time the funds for defraying the expence have considerably decreased, there being a deficiency of no less than £25. By the footing on which the Dispensary stands, the deficiency must necessarily fall on the Physician's salary: and therefore it is likely that he will be worst paid when he has the greatest trouble. The supplies of the Dispensary must always be precarious, while it has no certain fund for its support. Formerly it received assistance from the funds of the Infirmary; but now it receives no assistance at all, owing to its disjunction and separation from that Institution.

“ The propriety of this measure may be very justly questioned: for, if there were no Dispensary in Aberdeen, most of the patients who at present have the benefit of the Dispensary would be obliged to apply to the Infirmary. And supposing all of them to come under the denomination of out-patients only, yet still the Hospital would be burdened with the expence of medicines to those patients. But the truth is, that by far the greater part of the Dispensary patients is composed of such patients as are confined to their rooms or beds, and ought to be admitted as house-patients at the Infirmary. And were it not for the Dispensary, the Infirmary would be bur-



dened not only with the expence of medicines, but with the expence of maintaining these patients in the House. To confirm the truth of this, I shall mention only one instance.

“ There are no less than 660 patients on the Dispensary list last year, whose diseases were fevers. Of these at least 330 were proper to be sent to the Infirmary : and had they been sent there, each patient, at a medium, would have remained in the House three weeks : and the expence of maintaining such a number of patients in the House, including wine and other necessaries, must have been very considerable. Now all this expence has been saved by means of the Dispensary. As, therefore, the Infirmary is so greatly benefited by the Dispensary, it is but reasonable that the latter should receive some benefit in return from the funds of the former, as was always the case before the disjunction. The expence of medicines, at least, should be paid by the Infirmary ; or the medicines might be given out at the Infirmary shop, according to the prescriptions of the Physician of the Dispensary, which was appointed by the original plan of this Institution, as may be seen in the minutes of the 17th April, 1781.

“ But if it shall not be thought proper to resume and continue the original plan, there appears to be only one other resource ; which is, to make a regulation that the patients recommended to the Dispensary shall pay for their medicines, according to the common rates paid for drugs at the shops of Apothecaries. For, as the public at large do not seem disposed to contribute in a proper manner for the support of the Dispensary, it is but reasonable that those persons who actually receive the benefit of the Institution, should themselves in some measure contribute for its support, by paying for their medicines. The expence to each individual would be so trifling, that there is

scarce one in an hundred who could not afford it; and those who are unable or unwilling to pay for their medicines would apply to the Infirmary, which would tend to lessen the prodigious number of patients who apply to the Dispensary at present.

“ These are my sentiments on the matter, which I beg leave to submit to your consideration. And I hope, Gentlemen, that you will think it highly requisite to contrive some expedient to make up the deficiency of last year, as well as to put the Institution on a more certain establishment for the future.

(Signed) “ AL. GORDON.”

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Nº IV.

*Minute of a General Court of the President and Managers of the Infirmary, held April 5th, 1790.*

“ THE Meeting having taken into consideration the footing the Dispensary is upon, and at great length deliberated on the same, they are unanimously of opinion, that the Dispensary in all its branches should be totally disjoined from the funds and management of the Infirmary, from and after the 30th of April current, and resolve and enact accordingly. And the Meeting recommend to the Auditors of the Dispensary accounts for the year ending the 1st of March last, to settle and close them as soon as possible, and to pay up to Dr. Gordon the balance thereon, which the Dispensary funds have not been able to an-

swer: as also, authorise and empower the same Auditors to pay up to Dr. Gordon a proportion of his annual salary as Dispensary Physician, with his account of medicines from the 1st of March last to the 1st of May next, when the Institution of the Dispensary is to cease as to any further management or connection with this House."















